

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Skilled Healthcare Group Inc. Political Action Committee

ADDRESS (number and street) 27442 Portola Parkway Suite 200  
 Check if different than previously reported. (ACC)  
Foothill Ranch CA 92610

2. **FEC IDENTIFICATION NUMBER** C00442426  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2010 through 06 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jon Sadayasu

Signature of Treasurer Electronically Filed by Jon Sadayasu Date 07 09 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Skilled Healthcare Group Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		58279.42
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	62868.18									
(c) Total Receipts (from Line 19) .....	7444.16	14032.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	70312.34	72312.34								
7. Total Disbursements (from Line 31) .....	2326.00	4326.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	67986.34	67986.34								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Skilled Healthcare Group Inc. Political Action Committee

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4228.76	7241.22
(ii) Unitemized .....	3215.40	6691.70
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	7444.16	13932.92
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	7444.16	13932.92
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	100.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	7444.16	14032.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7444.16	14032.92

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	1826.00	3826.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2326.00	4326.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2326.00	4326.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	7444.16	13932.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7444.16	13932.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Kelly Atkins	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-781194
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 36.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Southwest Payroll Services LLC	Occupation SVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kelly Atkins	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-985718
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 36.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Southwest Payroll Services LLC	Occupation SVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kelly Atkins	Date of Receipt MM / DD / YYYY 05 / 07 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501247
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 36.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Southwest Payroll Services LLC	Occupation SVP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>108.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

A. Form/Schedule : **SA11AI**

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 30  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kelly Atkins</p> <p>Mailing Address 27442 Portola Pkwy #200</p> <p>City State Zip Code Foothill Ranch CA 92610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Southwest Payroll Services LLC Occupation: SVP Operations</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">360.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 21 / 2010</span></p> <p><b>Transaction ID:</b> A2010-1501368</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">36.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Kelly Atkins</p> <p>Mailing Address 27442 Portola Pkwy #200</p> <p>City State Zip Code Foothill Ranch CA 92610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Southwest Payroll Services LLC Occupation: SVP Operations</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">396.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 04 / 2010</span></p> <p><b>Transaction ID:</b> A2010-1501504</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">36.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Kelly Atkins</p> <p>Mailing Address 27442 Portola Pkwy #200</p> <p>City State Zip Code Foothill Ranch CA 92610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Southwest Payroll Services LLC Occupation: SVP Operations</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">432.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 18 / 2010</span></p> <p><b>Transaction ID:</b> A2010-1501639</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">36.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">108.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Carrie Benefield		Date of Receipt MM / DD / YYYY 06 / 11 / 2010		
	Mailing Address 27637 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501609		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Skilled Healthcare Group Inc.		Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Carrie Benefield		Date of Receipt MM / DD / YYYY 06 / 25 / 2010		
	Mailing Address 27637 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1568259		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Skilled Healthcare Group Inc.		Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) William A Crommett		Date of Receipt MM / DD / YYYY 04 / 09 / 2010		
	Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-781191		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Southwest Payroll Services LLC		Occupation CIOSVP IT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	140.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 30  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
William A Crommett

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation CIOSVP IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2010

**Transaction ID:** A2010-985715

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
William A Crommett

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation CIOSVP IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2010

**Transaction ID:** A2010-1501244

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
William A Crommett

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation CIOSVP IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2010

**Transaction ID:** A2010-1501365

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **120.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) William A Crommett</p> <p>Mailing Address 27442 Portola Pkwy #200</p> <p>City State Zip Code Foothill Ranch CA 92610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Southwest Payroll Services LLC      Occupation CIOSVP IT</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">440.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 04 / 2010</span></p> <p><b>Transaction ID:</b> A2010-1501501</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">40.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) William A Crommett</p> <p>Mailing Address 27442 Portola Pkwy #200</p> <p>City State Zip Code Foothill Ranch CA 92610</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Southwest Payroll Services LLC      Occupation CIOSVP IT</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">480.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 18 / 2010</span></p> <p><b>Transaction ID:</b> A2010-1501636</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">40.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Huong Dang</p> <p>Mailing Address 2909 West Willits</p> <p>City State Zip Code Santa Ana CA 92704</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Skilled Healthcare Group Inc.      Occupation Internal Audit</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 09 / 2010</span></p> <p><b>Transaction ID:</b> A2010-781205</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">110.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 30  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Huong Dang

Mailing Address 2909 West Willits

City State Zip Code  
Santa Ana CA 92704

FEC ID number of contributing federal political committee. **C**

Name of Employer Skilled Healthcare Group Inc. Occupation Internal Audit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

**Transaction ID:** A2010-985728

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Huong Dang

Mailing Address 2909 West Willits

City State Zip Code  
Santa Ana CA 92704

FEC ID number of contributing federal political committee. **C**

Name of Employer Skilled Healthcare Group Inc. Occupation Internal Audit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 1 0

**Transaction ID:** A2010-1501257

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Huong Dang

Mailing Address 2909 West Willits

City State Zip Code  
Santa Ana CA 92704

FEC ID number of contributing federal political committee. **C**

Name of Employer Skilled Healthcare Group Inc. Occupation Internal Audit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 1 0

**Transaction ID:** A2010-1501378

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Skilled Healthcare Group Inc. Political Action Committee**

<b>A.</b>	Full Name (Last, First, Middle Initial) Huong Dang	Date of Receipt MM / DD / YYYY 06 / 04 / 2010
	Mailing Address 2909 West Willits	<b>Transaction ID:</b> A2010-1501513
	City State Zip Code Santa Ana CA 92704	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Skilled Healthcare Group Inc. Occupation Internal Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Huong Dang	Date of Receipt MM / DD / YYYY 06 / 18 / 2010
	Mailing Address 2909 West Willits	<b>Transaction ID:</b> A2010-1501648
	City State Zip Code Santa Ana CA 92704	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Skilled Healthcare Group Inc. Occupation Internal Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Kelly Delk	Date of Receipt MM / DD / YYYY 05 / 07 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501259
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Southwest Payroll Services LLC Occupation Area President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	85.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Kelly Delk	Date of Receipt MM / DD / YYYY 05 / 21 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501380
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Southwest Payroll Services LLC Occupation Area President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kelly Delk	Date of Receipt MM / DD / YYYY 06 / 04 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501515
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Southwest Payroll Services LLC Occupation Area President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kelly Delk	Date of Receipt MM / DD / YYYY 06 / 18 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501650
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Southwest Payroll Services LLC Occupation Area President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher Felfe		Date of Receipt	
	Mailing Address 27442 Portola Pkwy #200		M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-1501251
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Southwest Payroll Services LLC		Occupation CAO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher Felfe		Date of Receipt	
	Mailing Address 27442 Portola Pkwy #200		M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-1501372
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Southwest Payroll Services LLC		Occupation CAO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher Felfe		Date of Receipt	
	Mailing Address 27442 Portola Pkwy #200		M M / D D / Y Y Y Y Y 0 6 / 0 4 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-1501508
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Southwest Payroll Services LLC		Occupation CAO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher Felfe		Date of Receipt MM / DD / YYYY 06 / 18 / 2010		
	Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501643		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Southwest Payroll Services LLC	Occupation CAO	Aggregate Year-to-Date 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Denise German		Date of Receipt MM / DD / YYYY 06 / 04 / 2010		
	Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501505		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Southwest Payroll Services LLC	Occupation VPO	Aggregate Year-to-Date 220.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Denise German		Date of Receipt MM / DD / YYYY 06 / 18 / 2010		
	Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501640		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Southwest Payroll Services LLC	Occupation VPO	Aggregate Year-to-Date 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	65.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 30  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Kelly Gill

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer: Southwest Payroll Services LLC  
Occupation: President Ancillary Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt: 04 / 02 / 2010  
Transaction ID: A2010-781173  
Amount of Each Receipt this Period: 190.00

**B.**

Full Name (Last, First, Middle Initial)  
Boyd W Hendrickson

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer: Skilled Healthcare Group Inc.  
Occupation: CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt: 04 / 09 / 2010  
Transaction ID: A2010-781190  
Amount of Each Receipt this Period: 200.00

**C.**

Full Name (Last, First, Middle Initial)  
Boyd W Hendrickson

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer: Skilled Healthcare Group Inc.  
Occupation: CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt: 04 / 23 / 2010  
Transaction ID: A2010-985714  
Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 590.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 30  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Boyd W Hendrickson		Date of Receipt MM / DD / YYYY 05 / 07 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501243
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Skilled Healthcare Group Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

**B.**

Full Name (Last, First, Middle Initial) Boyd W Hendrickson		Date of Receipt MM / DD / YYYY 05 / 21 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501364
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Skilled Healthcare Group Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**C.**

Full Name (Last, First, Middle Initial) Boyd W Hendrickson		Date of Receipt MM / DD / YYYY 06 / 04 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501500
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Skilled Healthcare Group Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Boyd W Hendrickson		Date of Receipt MM / DD / YYYY 06 / 18 / 2010		
	Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501635		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Skilled Healthcare Group Inc.		Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2400.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Kristiina Hintgen		Date of Receipt MM / DD / YYYY 06 / 04 / 2010		
	Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501510		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Southwest Payroll Services LLC		Occupation SVP HR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Kristiina Hintgen		Date of Receipt MM / DD / YYYY 06 / 18 / 2010		
	Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501645		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Southwest Payroll Services LLC		Occupation SVP HR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	240.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Lorraine Kozloski		Date of Receipt MM / DD / YYYY 06 / 04 / 2010		
	Mailing Address 534 Via Estrada Unit A		Transaction ID: A2010-1501511		
	City Laguna Woods	State CA	Zip Code 92637	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Skilled Healthcare Group Inc.		Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Lorraine Kozloski		Date of Receipt MM / DD / YYYY 06 / 18 / 2010		
	Mailing Address 534 Via Estrada Unit A		Transaction ID: A2010-1501646		
	City Laguna Woods	State CA	Zip Code 92637	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Skilled Healthcare Group Inc.		Occupation Accountant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt MM / DD / YYYY 04 / 09 / 2010		
	Mailing Address 27442 Portola Pkwy #200		Transaction ID: A2010-781197		
	City Foothill Ranch	State CA	Zip Code 92610	Amount of Each Receipt this Period 38.46	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Southwest Payroll Services LLC		Occupation SVP Director of Tax		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 269.22			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	78.46
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 30  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt MM / DD / YYYY 04 / 23 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-985720
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Southwest Payroll Services LLC	Occupation SVP Director of Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

**B.**

Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt MM / DD / YYYY 05 / 07 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501249
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Southwest Payroll Services LLC	Occupation SVP Director of Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	

**C.**

Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt MM / DD / YYYY 05 / 21 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501370
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Southwest Payroll Services LLC	Occupation SVP Director of Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>115.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 30  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt MM / DD / YYYY 06 / 04 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501506
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Southwest Payroll Services LLC	Occupation SVP Director of Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

**B.**

Full Name (Last, First, Middle Initial) Frederic Maas		Date of Receipt MM / DD / YYYY 06 / 18 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-1501641
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Southwest Payroll Services LLC	Occupation SVP Director of Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

**C.**

Full Name (Last, First, Middle Initial) Roland Rapp		Date of Receipt MM / DD / YYYY 04 / 09 / 2010
Mailing Address 27442 Portola Pkwy #200		<b>Transaction ID:</b> A2010-781192
City Foothill Ranch	State CA	Zip Code 92610
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.00
Name of Employer Southwest Payroll Services LLC	Occupation General Counsel/CAO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1152.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>268.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Roland Rapp	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-985716
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 192.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Southwest Payroll Services LLC	Occupation General Counsel/CAO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Roland Rapp	Date of Receipt MM / DD / YYYY 05 / 07 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501245
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 192.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Southwest Payroll Services LLC	Occupation General Counsel/CAO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1536.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Roland Rapp	Date of Receipt MM / DD / YYYY 05 / 21 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501366
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 192.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Southwest Payroll Services LLC	Occupation General Counsel/CAO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1728.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	576.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 30  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Roland Rapp  
Mailing Address 27442 Portola Pkwy #200  
City Foothill Ranch State CA Zip Code 92610  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 06 / 04 / 2010  
Transaction ID: A2010-1501502  
Amount of Each Receipt this Period: 192.00

Name of Employer: Southwest Payroll Services LLC  
Occupation: General Counsel/CAO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date: 1920.00

**B.** Full Name (Last, First, Middle Initial)  
Roland Rapp  
Mailing Address 27442 Portola Pkwy #200  
City Foothill Ranch State CA Zip Code 92610  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 06 / 18 / 2010  
Transaction ID: A2010-1501637  
Amount of Each Receipt this Period: 192.00

Name of Employer: Southwest Payroll Services LLC  
Occupation: General Counsel/CAO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date: 2112.00

**C.** Full Name (Last, First, Middle Initial)  
Jon Sadayasu  
Mailing Address 27442 Portola Pkwy #200  
City Foothill Ranch State CA Zip Code 92610  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 06 / 04 / 2010  
Transaction ID: A2010-1501509  
Amount of Each Receipt this Period: 20.00

Name of Employer: Southwest Payroll Services LLC  
Occupation: VP Finance Controller  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date: 220.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 404.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jon Sadayasu	Date of Receipt MM / DD / YYYY 06 / 18 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-1501644
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Southwest Payroll Services LLC	Occupation VP Finance Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Aisha Salaam	Date of Receipt MM / DD / YYYY 04 / 09 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-781193
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Southwest Payroll Services LLC	Occupation SVP Professional Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Aisha Salaam	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 27442 Portola Pkwy #200	<b>Transaction ID:</b> A2010-985717
	City State Zip Code Foothill Ranch CA 92610	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Southwest Payroll Services LLC	Occupation SVP Professional Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 30  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Aisha Salaam

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation SVP Professional Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2010

**Transaction ID:** A2010-1501246

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Aisha Salaam

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation SVP Professional Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2010

**Transaction ID:** A2010-1501367

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Aisha Salaam

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation SVP Professional Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2010

**Transaction ID:** A2010-1501503

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 30  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Aisha Salaam

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation SVP Professional Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2010

**Transaction ID:** A2010-1501638

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary Thurber

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 28 / 2010

**Transaction ID:** A2010-1501458

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary Thurber

Mailing Address 27442 Portola Pkwy #200

City State Zip Code  
Foothill Ranch CA 92610

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Payroll Services LLC  
Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
06 / 11 / 2010

**Transaction ID:** A2010-1501593

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **90.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 28 / 30	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Thurber		Date of Receipt	
	Mailing Address 27442 Portola Pkwy #200		M M / D D / Y Y Y Y 06 / 25 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-1568244
	Foothill Ranch	CA	92610	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		20.00	
Name of Employer Southwest Payroll Services LLC		Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	20.00
<b>TOTAL</b> This Period (last page this line number only) .....	4228.76

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 30

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Chet Edwards for Congress Cmte

Mailing Address PO Box 23273

City State Zip Code  
Waco TX 76702

Purpose of Disbursement  
Contribution

Candidate Name  
Chet Edwards

Office Sought:  House  
 Senate  
 President  
State: TX District: 17

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: B330811

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ..... ▶

TOTAL This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Skilled Healthcare Group Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Iowa Health PAC	Transaction ID: B329862 Date of Disbursement 05 / 18 / 2010
	Mailing Address 1775 90th Street	Amount of Each Disbursement this Period 576.00
	City West Des Moines State IA Zip Code 50266	
	Purpose of Disbursement Non-Federal PAC Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Diane Denish for Governor	Transaction ID: B327688 Date of Disbursement 04 / 16 / 2010
	Mailing Address PO Box 30561	Amount of Each Disbursement this Period 1000.00
	City Albuquerque State NM Zip Code 87190	
	Purpose of Disbursement P-2010 Governor NM Candidate Name Diane Denish	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Edmund Kuempel Campaign	Transaction ID: B329005 Date of Disbursement 05 / 06 / 2010
	Mailing Address 523 East Donegan Street	Amount of Each Disbursement this Period 250.00
	City Seguin State TX Zip Code 78155	
	Purpose of Disbursement G-2010 State House 44 TX Candidate Name Edmund Kuempel	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1826.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1826.00</b>